

The Administrator Washington: D.C. 20201

NOV - 3 2000

Mr. Robert T. Maruca
Director
Medical Assistance Division
New Mexico Human Services Department
P.O. Box 2348
Santa Fe, New Mexico 87504-2348

Dear Mr. Maruca:

We are pleased to inform you that the amendment dated July 25, 2000, for your State's Medicaid section 1115 demonstration waiver project No. 11-W-00124/6, has been approved with clarifications you submitted on August 29, September 19, and September 20. Specifically, this amendment eliminates copayments for Native American children receiving services through your Medicaid expansion under Title XXI of the Social Security Act (the Act).

Our approval of this demonstration (and the waivers and the Federal matching provided for thereunder) is conditioned upon compliance with the original special terms and conditions.

All requirements of the Medicaid program expressed in law, regulation, and policy statement, not expressly waived or identified as not applicable in this letter shall apply to the demonstration project. The following waivers and matching authority were approved on January 11, 1999, for a 5-year period. The exception which permits copayments is revised to reflect this amendment.

Costs Not Otherwise Matchable

Under the authority of section 1115(a)(2) of the Act, the following expenditures that would not otherwise be regarded as expenditures under section 1903 will be regarded as expenditures under the State's Title XIX plan.

Expenditures to provide Medicaid coverage, in accordance with all Medicaid requirements except as provided below, to children through age 18 with family incomes from 186 percent through 235 percent of the Federal Poverty Level (FPL).

Exception to Medicaid Requirements for the Demonstration Population

A. Existing Waivers. The following waivers, granted on 5/13/97, under authority of section 1915(b), will apply to the expansion population under this demonstration to the same extent as they apply to the existing Medicaid population.

1. Statewideness

Section 1902(a)(1)

This section of the Act requires a Medicaid State plan to be in effect in all political subdivisions of the State. The services available under the waiver may vary by geographic location.

2. Amount, Duration and Scope of Services

Section 1902(a)(10)(B)

To enable the State to offer additional benefits such as case management and health education that will not be available to Medicaid beneficiaries not enrolled in the waiver program.

3. Freedom of Choice

Section 1902(a)(23)

To enable the State to restrict freedom-of-choice of providers.

B. Additional Exceptions.

In order to implement the proposed cost sharing provisions, the following exception to Medicaid requirements is approved only for the demonstration population.

Copayments

Section 1916(a)(2)(A) Section 1916(a)(3)

To enable the State to impose copayments that are not nominal on children through age 18 with family incomes from 186 percent through 235 percent of the FPL. Copayments do not apply to Native American children.

Your project officer is Mr. Maurice Gagnon, and he is available to answer questions concerning implementation of this amendment in your Title XXI program. Mr. Gagnon's contact information is as follows:

Health Care Financing Administration Center for Medicaid and State Operations Mail Stop S2-01-16 7500 Security Boulevard Baltimore, Maryland 21244-1850

Telephone: (410) 786-0619 Facsimile: (410) 786-3517 E-mail: mgagnon@hcfa.gov

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Official communications regarding program matters should be sent simultaneously to Mr. Gagnon and to Mr. Calvin Cline, Associate Regional Administrator for HCFA Region VI, Division of Medicaid and State Operations.

Mr. Cline's Internet address is: ccline @ hcfa.gov. His mailing address is:

Health Care Financing Administration Division of Medicaid and State Operations 1301 Young Street, Room 714 Dallas, TX 75202

We look forward to continuing to work with you and your staff.

Sincerely,

Michael M. Hash Acting Administrator